Application or Docket Number

| Effective October 1, 2001  |  |                                    |                                    |                       |  |                                       |                    |                       |          |                           |                        |  |
|--|--|------------------------------------|------------------------------------|-----------------------|--|---------------------------------------|--------------------|-----------------------|----------|---------------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                           |  |                                    |                                    |                       |  | SMALI<br>TYPE                         | SMALL ENTITY TYPEO |                       |          | OTHER THAN R SMALL ENTITY |                        |  |
| TOTAL CLAI   | MS   |                                    |                                    |                       |  |                                       | RATE FEE           |                       | 1        | RATE                      | FEE                    |  |
| FOR  |  | NUMBE                              | NUMBER FILED                       |                       | BER EXTRA                                    | BASIC                                 |                    | 355                   | OR!      | BASIC FEE                 |                        |  |
| TOTAL CHARGEABLE CLAIMS  |  | 188 m                              | /88 minus 20=                      |                       | 8  | X\$ 9                                 |                    | 1512                  | 1 ]      | 7/2.2                     | -                      |  |
| INDEPENDEN   | T CLAIMS   | 1/                                 | // minus 3 =                       |                       | *15  |                                       |                    |                       | OR       | 7/24                      | <del> </del>           |  |
| MULTIPLE DE  | PENDENT CLAIM P  | RESENT                             |                                    | 1.0                   |  | X42:                                  | +                  | 630                   | OR       |                           |                        |  |
| * If the differe   | nce in column 1 is   | less than                          | zero ente                          | r "N" in              | column 2                                     | +140                                  |                    |                       | OR       | L                         |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |                                    |                                    |                       |  | TOTA                                  | 'L                 |                       | OR       | •                         | <u></u>                |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)             |  |                                    |                                    |                       |  | SMAI                                  | _L E1              | NTITY                 | OR       | OTHER<br>SMALL E          |                        |  |
| Total Independed   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                    |                                    | HEST<br>MBER<br>OUSLY | PRESENT<br>EXTRA                             | RATE                                  | Ξ  Τ               | ADDI-<br>TONAL<br>FEE |          | RATE                      | ADDI-<br>TIONAL<br>FEE |  |
| Total  | * 197  | Minus                              | ** ]                               | 88                    | = 9  | X\$ 9=                                |                    | 8100                  | OR       | X\$18=                    |                        |  |
| Independer<br>FIRST PRE  | ESENTATION OF MI   | Minus                              | *** PENDENT                        | 18<br>TOLAIN          | = 2  | X42=                                  | 18                 | 400                   | OR       | X84=                      |                        |  |
| 1110111  | DENTATION OF ALL   | JLIIFLL DL                         | PENDENT                            | CLAIIV                | <u>'                                    </u> | +140=                                 | ľ                  |                       | OR       | +280≒                     |                        |  |
|  |  |                                    |                                    |                       |  | TOTA<br>ADDIT. FE                     | AL /               | 15.00                 | OR ,     | TOTAL<br>ADDIT. FEE       |                        |  |
| <u></u>  | (Column 1)   |                                    | (Colun                             |                       | (Column 3)                                   | (348)                                 | 00)                | pa.                   | •        |                           |                        |  |
| Total Independen   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                    | HIGHI<br>NUME<br>PREVIO<br>PAID F  | IBER<br>OUSLY         | PRESENT<br>EXTRA                             | RATE                                  | A<br>Ti            | ADDI-<br>IONAL<br>FEE |          | RATE                      | ADDI-<br>TIONAL<br>FEE |  |
| Total  | 98   | Minus                              | 197                                |                       | -  | X\$ 9=                                |                    |                       | OR       | X\$18=                    |                        |  |
| 5  |  | Minus                              |                                    | - CI AIM              | = ]  | X42=                                  | 1                  | - 1                   | OR       | X84=                      | t <sub>e</sub> .       |  |
| FINO! FIL  | SENTATION OF MU  | LTIPLE DE                          | PENDENI                            | CLAIM                 |  | +140=                                 | 1                  |                       | OR       | +280=                     |                        |  |
| E  | BEST AVAIL   | ARIE                               | COPY                               | ,                     |  | TOTA                                  | W -                |                       | <b>L</b> | TOTAL                     | 护领                     |  |
| (Column 1) (Column 2) (Column 3)   |  |                                    |                                    |                       |  | ADDIT. FE                             |                    | 048                   | J1 , A   | ADDIT. FEE                |                        |  |
| Total Independent  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                    | HIGHE<br>NUMB<br>PREVIOU<br>PAID F | BER<br>DUSLY          | PRESENT<br>EXTRA                             | RATE                                  | TIC                | ADDI-<br>ONAL<br>FEE  | - 4      | RATE                      | ADDI-<br>TIONAL<br>FEE |  |
| Total  | 1  | Minus                              | **                                 |                       | =  | X\$ 9=                                |                    |                       | OR       | X\$18=                    |                        |  |
| Independent  |  | Minus                              | ***                                |                       | =  | X42=                                  | +                  |                       | 1        | X84=                      |                        |  |
| FIRST PRES   | SENTATION OF MU  | LTIPLE DEF                         | PENDENT                            | CLAIM                 |  | -                                     | +-                 | 1                     | OR       |                           |                        |  |
| * If the entry in co   | olumn 1 is less than the   | - cotor in coli                    | 2 write                            | "O" in col            | <b>3</b>                                     | +140=                                 |                    |                       | OR       | +280=                     |                        |  |
| ** If the "Highest I   | Number Previously Pai<br>Number Previously Pai<br>Number Previously Paid<br>Iumber Previously Paid | id For" IN THIS<br>id For" IN THIS | IS SPACE is I<br>IS SPACE is       | less than less than   | n 20, enter "20."<br>n 3, enter "3."         | TOTAL<br>ADDIT. FEE<br>found in the a | E <b>L</b>         |                       |          | TOTAL<br>DDIT. FEE        |                        |  |